

**CLAIMS ONLY**

Application Number

10/689580

Filing Date

**Applicant(s)**

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
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13						
14						
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46						
47						
48						
49						
50						
Total Indep						
Total Depend						
Total Claims						

May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
53						
54						
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56						
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59						
60						
61						
62						
63						
64						
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99						
100						
Total Indep						
Total Depend						
Total Claims						

## CLAIMS ONLY

Application Number

Filing Date

Cont id 689580

**Applicant(s)**

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
ID 1						
ID 2						
ID 3						
ID 4						
ID 5						
ID 6						
ID 7						
ID 8						
ID 9						
ID 10						
ID 11						
ID 12						
ID 13						
ID 14						
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ID 40						
ID 41						
ID 42						
ID 43						
ID 44						
ID 45						
ID 46						
ID 47						
ID 48						
ID 49						
ID 50						
Total Indep	19					
Total Depend	85					
Total Claims	ID 4					

May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
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61						
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100						
Total Indep						
Total Depend						
Total Claims						